

Statement by Brigadier General S. Bayne-Jones, USA, Deputy Chief,  
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(For presentation on 14 December 1944 before the Senate Sub-Committee  
on Wartime Health and Education, under the Chairmanship of Senator  
Claude Pepper)

In his detailed statement, Brigadier General Simmons has  
presented a summary of the many research activities of the Office  
of The Surgeon General during the present war. In fact as shown  
by General Simmons, even while the national emergency was arising,  
the vision of the need for expanded research by Medical Department  
agencies and by civilian groups was so clear that organizations were  
planned and developed and work gotten underway fully a year before  
Pearl Harbor. Since the ground has been covered so thoroughly by  
General Simmons, I feel that there are only three points on which  
I may be able to add information from personal experience. These  
are: (1) the activities of the Board for the Investigation and  
Control of Influenza and Other Epidemic Diseases in the Army, now  
called by the shorter title, Army Epidemiological Board, (2) the  
research activities of the United States of America Typhus Commission  
and (3) the plans for post-war research which are now under discussion







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in the Office of The Surgeon General. All three of these have in common research conducted directly by Army personnel and research carried out in collaboration and in liaison with civilian institutions through the active cooperation of leading civilian experts in the field of medical research.

Board for the Investigation and Control of Influenza  
and Other Epidemic Diseases in the Army

The proposal for the establishment of a board for the investigation of influenza and other epidemics in the Army was presented by Brigadier General James S. Simmons (then a Lieutenant Colonel) in a memorandum dated 27 December 1940. A letter under this date then went forward to The Adjutant General over the signature of Major General James C. Magee, The Surgeon General. In reply on 11 January 1941, by order of the Secretary of War, the plan was approved and the board was established. In The Surgeon General's recommendation for the establishment of this board it was pointed out that in the past one of the important agencies utilized in the campaign against infectious diseases consisted of special boards composed of most competent specialists available in the country, either military or civilian, whose function it was to study infectious diseases among troops and to advise The Surgeon General as to the best methods of prevention and treatment. Reference was then made to the great increase in knowledge of respiratory and other

diseases which had been gained since World War I and it was stated in this letter of 27 December 1940 that "It is considered of urgent importance that the Army make immediate arrangements to utilize every scientific facility available in this country in a concerted effort to control these diseases and to reduce their mortality to a minimum". Following this statement of reasons and need for the board, the letter outlines proposed organization and personnel. In essence, the organization then proposed is essentially the organization which has been in effect since January 1941. It consists essentially of a central board, and a group of civilian consultants organized in commissions and investigative teams. Organization was rapidly completed in January 1941 and since then this board has functioned consistently and effectively under the presidency of Doctor Francis G. Blake.

The organization of the board consists of a central board of 7 members and of 10 commissions with membership including approximately 100 civilian consultants to the Secretary of War who are experts in their special fields. The names of the commissions are as follows:

Commission on Acute Respiratory Diseases

Commission on Air-Borne Infections

Commission on Epidemiological Survey

Commission on Hemolytic Streptococcal Infections

Commission on Influenza



Commission on Measles and Mumps

Commission on Meningococcal Meningitis

Commission on Neurotropic Virus Diseases

Commission on Pneumonia

Commission on Tropical Diseases

The fields of activity are indicated by the names of these commissions but the designations are not interpreted so strictly as to prevent collaboration between commissions for work on a problem of common interest and importance to The Surgeon General and for the utilization of the talents of the consultants on any medical research problem in the field of infectious diseases that concerns the Army.

The whole board and commissions, organically a part of the Office of The Surgeon General, are administered through Preventive Medicine Service. The consultants are on a part-time basis and are stationed at their home institutions. They are called to duty under orders issued through the Office of The Surgeon General and their services are utilized in the field from time to time. These consultants have worked in camps and posts in the continental United States. They have also served abroad in investigations of infectious diseases among our troops in overseas theaters of operation. In addition to the civilian consultants, a group of Medical Department officers is attached to these commissions.

The commissions carry on long term investigations in the laboratories of the home institutions, particularly the institutions at which the directors of commissions reside. In addition, commissions carry out field investigations lasting from a few weeks to a year or more in Army installations. Except for the Respiratory Diseases Commission Laboratory at Fort Bragg, North Carolina, which is established as a Class IV installation under the jurisdiction of The Surgeon General, the board and commissions do not own or operate any laboratories of their own. All of their work in laboratories in civilian universities, hospitals and institutes is arranged for through War Department research contracts. These contracts between the War Department and civilian institutions have made it possible for the Army to secure very valuable services and facilities in the leading institutions in the country.

Actively engaged in medical research of importance to the Army since January 1941, these commissions have dealt with upwards of a hundred projects. Reports of their work have been made immediately available to The Surgeon General and important actions for the welfare of the troops have been taken on the basis of these reports. Examples which might be cited among many are: studies of housing and living conditions in barracks, the control of respiratory diseases by limiting dust and bacterial content of the air in barracks, through applications of oil to floors and bed clothing, development of a vaccine against influenza, basic work leading to the development



of a vaccine against Japanese B encephalitis, studies giving information for improvement in the use of atabrine, the experimental production of atypical (virus) pneumonia, investigations on infectious hepatitis, assembly of information of the distribution of leprosy throughout the world, the control of hemolytic streptococcal infections and the investigations of rheumatic fever and many others which might be mentioned. In many situations, too numerous to mention, the board and commissions have stood ready to advise and assist The Surgeon General. They have been one of the mainstays of The Surgeon General's efforts to preserve and maintain the health of troops. During this time, the commissions have contributed to fundamental scientific information. Since 1941, upward of 150 scientific papers have been published and many more are in press or in preparation.

These matters are summarized briefly, partly to give an indication of the accomplishments which have been achieved by the research activities of this board and primarily to call attention to it as a successful cooperative enterprise between the Office of The Surgeon General of the Army and the leading civilian institutions of the country. It has exemplified the fact that effective medical research can be done through an Army organization in which both Medical Department officers and civilians are engaged, and in which resources of great civilian institutions are brought to the support of the Army's program for medical research in this field. The board

and commissions testify to the early appreciation of the fact that both competent military personnel and competent civilians are necessary to meet the needs for research from which the new and increasingly beneficial information is drawn -- beneficial both to the Armed Forces and for the advancement of science. The operation of this board is having a direct bearing on some of the conceptions for post-war research organization now under discussion in the Office of The Surgeon General.

Through constant liaison, and exchange of information, the activities of this Board have been coordinated with appropriate divisions of the Office of Scientific Research and Development, the Committee on Medical Research, research establishments of the Army, Navy and Public Health Services, Governmental Departments, scientific societies and a large number of individuals.

#### United States of America Typhus Commission

In the President's Executive Order No. 9285 dated 24 December 1942, establishing the United States of America Typhus Commission, provision is made for research on typhus fever and for collaboration with all appropriate agencies. Ever since the Commission went into action in January 1943, research on typhus fever and the related rickettsial diseases has been one of the main objectives. This research has been conducted in this country and overseas by Typhus Commission personnel, and in this country



by investigators in the laboratories of the Army Medical School, the Army Medical Museum, National Institute of Health, U. S. Public Health Service, and the Naval Medical Research Institute. Furthermore, there has been full collaboration with numerous civilian institutions both in this country and abroad. The work has advanced the understanding of typhus, has improved control measures of both epidemic typhus and scrub typhus and may be leading to the discovery of effective remedies for several types of typhus fever. There are many unsolved problems, but definite progress is being made. The point which I wish to emphasize is that the operation of the U. S. A. Typhus Commission again exemplifies collaboration and coordination of activities of both military and civilian agencies and the drawing to the support of a research program great resources and competent investigators from both military and civilian establishments.

#### Post-War Research Planning

As stated by General Simmons, the Office of The Surgeon General has a long tradition of medical research conducted by Army Medical Department personnel and also through far-reaching association with civilian research organizations and governmental organizations. It is no new idea to think of the continuance and organization of such associations after the end of this war. Like other technical services, the Office of The Surgeon General has for a number of months been giving special study to plans for post-war medical research.

Out of these discussions have come two opinions which have a bearing on the subject of this hearing. One of these is that there must of necessity be continued research by the Medical Department itself. The second is that both experience of the past and vision of the future clearly show a need for organization, coordination and support of medical research on a national scale.

In connection with this statement, I have not been informed by the Bureau of the Budget of the relationship of my remarks to the program of the President.

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